

Campaign Finance Report

AZ HOSPITAL AND HEALTHCARE ASSN PAC Committee #: 1260

Treasurer: LANGE, LAURIE

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2004 Post-General Election Report

Election Cycle: 2003-2004

Date Filed: November 24, 2004

Reporting Period: October 14, 2004-November 22, 2004

Summary of Finances

Cash Balance at Beginning of Reporting Period: \$10,510.23

Total Cash Receipts this Reporting Period: \$300.00

Total Cash Disbursements this Reporting Period: \$6,704.23

Cash Balance at End of Reporting Period: \$4,106.00

Report ID: 3751

Covers 10/14/2004 to 11/22/2004 Filed on 11/24/2004

Summary of Activity

Income	Schedule	This Period			Total to Data
		Cash	Other	Total	Total to Date
Personal and Family Contributions	C1	\$0.00	\$0.00	\$0.00	\$0.00
Individual Contributions	C2	\$300.00	\$0.00	\$300.00	\$20,851.50
Contributions from Political Committees	C3	\$0.00	\$0.00	\$0.00	\$0.00
Business Contributions	C4	\$0.00	\$0.00	\$0.00	\$0.00
Small Contributions	C5	\$0.00	\$0.00	\$0.00	\$0.00
CCEC Funding and Matching	C6	\$0.00	\$0.00	\$0.00	\$0.00
Qualifying Contributions	C7	\$0.00	\$0.00	\$0.00	\$0.00
Loans Made to this Committee	L1	\$0.00	\$0.00	\$0.00	\$0.00
Other Receipts, including Interest and Dividends	R1	\$0.00	\$0.00	\$0.00	\$4,480.00
Transfers from Other Committees	T1	\$0.00	\$0.00	\$0.00	\$0.00
Cash Surplus from Previous Committee	S1	\$0.00	\$0.00	\$0.00	\$0.00
Total Income		\$300.00	\$0.00	\$300.00	\$25,331.50

Expenditures	Schedule	This Period			Total to Data
•		Cash	Other	Total	Total to Date
Operating Expenses	E1	\$104.23	\$0.00	\$104.23	\$11,252.41
Independent Expenditures	E2	\$0.00	\$0.00	\$0.00	\$0.00
Contributions to Other Committees	E3	\$0.00	\$0.00	\$0.00	\$0.00
Other Expenses	E4	\$6,600.00	\$0.00	\$6,600.00	\$24,829.22
Transfers to Other Committees	T1	\$0.00	\$0.00	\$0.00	\$0.00
Loans Made by This Committee	L2	\$0.00	\$0.00	\$0.00	\$0.00
Expenditure of In-Kind Contributions	C8	\$0.00	\$0.00	\$0.00	\$0.00
Disposal of Surplus Cash	S1	\$0.00	\$0.00	\$0.00	\$0.00
Total Expenditures		\$6,704.23	\$0.00	\$6,704.23	\$36,081.63
Bill Payments for Previous Expenditures	D1	\$0.00		\$0.00	\$0.00
Total Cash Disbursed		\$6,704.23			

Schedule C2 - Individual contributions

Scheaule	C2 - Individual contributions	Date	Amount	Cycle To Date
Name:	BURKE, JAMES	10/19/2004	\$75.00	\$75.00
Address:	8221 N 73rd Pl, Scottsdale, AZ 85258		Cash	
Occupation:	CMO, SCOTTSDALE HEALTHCARE			
Name:	GREER, RHONDA	10/19/2004	\$25.00	\$25.00
Address:	201 Lee St, Winslow, AZ 86047		Cash	
Occupation:	WINSLOW MEMORIAL HOSPITAL			
Name:	HAMBLEN, JEFF	10/19/2004	\$50.00	\$50.00
Address:	6123 E Camden Rd, Flagstaff, AZ 86004		Cash	
Occupation:	CEO, WINSLOW MEMORIAL HOSPITAL			
Name:	MARTIN, WOODROW	10/19/2004	\$75.00	\$75.00
Address:	10691 S Del Golfo, Yuma, AZ 85367		Cash	
Occupation:	YUMA REGIONAL MEDICAL CENTER			
Name:	REFFNER, REGINA	10/19/2004	\$25.00	\$25.00
Address:	2900 Sagebrush Dr, Winslow, AZ 86047		Cash	
Occupation:	WINSLOW MEMORIAL HOSPITAL			
Name:	SPENCER, CONRAD	10/19/2004	\$50.00	\$150.00
Address:	3514 Sunrise St, Winslow, AZ 86047		Cash	
Occupation:	BOARD VICE-CHAIRMAN, WINSLOW MEMORIAL HOSPITAL			
Total of Individual Contributions			\$300.00	
Total of Refunds Given			\$0.00	
Net Total of Individual Contributions			\$300.00	

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Schedule E1 - Operating expenses

Scheanie	e E1 - Operating expenses	Date	Amount	Cycle To Date
Name:	WELLS FARGO BANK	10/14/2004	\$32.43	\$424.41
Address:	PO BOX 63020, SAN FRANCISCO, CA 94163		Cash	
Memo:	Bank Card Fee			
Name:	WELLS FARGO BANK	10/14/2004	\$11.83	\$424.41
Address:	PO BOX 63020, SAN FRANCISCO, CA 94163		Cash	
Memo:	Client Analysis Service Charge			
Name:	WELLS FARGO BANK	11/16/2004	\$51.44	\$424.41
Address:	PO BOX 63020, SAN FRANCISCO, CA 94163		Cash	
Memo:	Bank Card Fee			
Name:	WELLS FARGO BANK	11/16/2004	\$8.53	\$424.41
Address:	PO BOX 63020, SAN FRANCISCO, CA 94163		Cash	
Memo:	Client Analysis Service Charge			
Total of Operat	ing Expenses		\$104.23	
Total of Refund	ds, Rebates, and Credits Received		\$0.00	
Net Total of Op	perating Expenses		\$104.23	

Covers 10/14/2004 to 11/22/2004

Schedule E4 - Other expenses

Schedule E	14 - Other expenses	Date	Amount	Cycle To Date
Name:	HEALTHCARE PROFESSIONALS FOR QUALITY HEALTHCARE	10/27/2004	\$6,600.00	\$22,869.22
Address:	2901 N Central Ave, Ste 900, Phoenix, AZ 85012		Cash	
Memo:	Independent Expenditure Campaign			
Total of Other Exp	Total of Other Expenses			
Total of Refunds, Rebates, and Credits Received			\$0.00	
Net Total of Other Expenses			\$6,600.00	

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